



Docket No.  
18810-82152

## Declaration For Patent Application

### English Language Declaration

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

#### GENETIC MARKER TEST FOR LUPUS

the specification of which

(check one)

☐ is attached hereto.

☒ was filed on July 18, 2001 as United States Application No. or PCT International Application Number 09/909,317 and was amended on \_\_\_\_\_

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Not Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

☐

I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

_____	_____
(Application Serial No.)	(Filing Date)
_____	_____
(Application Serial No.)	(Filing Date)
_____	_____
(Application Serial No.)	(Filing Date)

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, CFR Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

09/280,181	03/29/99	USPN 6280941 - 8/28/01
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)
_____	_____	_____
(Application Serial No.)	(Filing Date)	(Status)
		(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor <b>Betty P. Tsao</b>	
Sole or first inventor's signature	Date
Residence <b>3036 Stoner Avenue, Los Angeles, CA 90066</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of second inventor, if any <b>Rita M. Cantor</b>	
Second inventor's signature <i>Rita M. Cantor</i>	Date <b>1/13/04</b>
Residence <b>5239 Kingspine Road, Rolling Hills Estates, CA 90274</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of third inventor, if any <b>Jerome I. Rotter</b>	
Third inventor's signature	Date
Residence <b>2617 Greenfield Avenue, Los Angeles, CA 90064</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ no such person, concern or organization exists.  
☒ each such person, concern or organization is listed below.

FULL NAME Betty P. Tsao  
 ADDRESS 3036 Stoner Avenue, Los Angeles, California 90066

☒ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME The Regents of the University of CA, 1111 Franklin Street -12th Floor, Oakland, CA 94607  
 ADDRESS \_\_\_\_\_

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

FULL NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_

☐ Individual ☐ Small Business Concern ☐ Nonprofit Organization

Separate verified statements are recommended from each named person, concern or organization having rights to the invention averring to their status as small entities.

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.27(g)(2))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: Peter E. Braveman, Esq.  
 TITLE IN ORGANIZATION: Senior Vice President for Legal Affairs and General Counsel  
 ADDRESS OF PERSON SIGNING: Cedars-Sinai Medical Center  
8700 Beverly Boulevard  
Los Angeles, CA 90048

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

12/9/03

I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, CFR Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

09/280,181

03/29/99

USPN 6280941 - 8/28/01

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Status)  
(patented, pending, abandoned)

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Status)  
(patented, pending, abandoned)

\_\_\_\_\_  
(Application Serial No.)

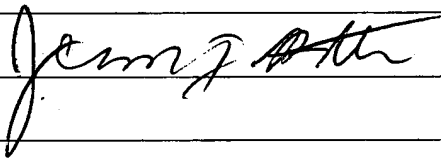
\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Status)  
(patented, pending, abandoned)

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Full name of sole or first inventor <b>Betty P. Tsao</b>	
Sole or first inventor's signature	Date
Residence <b>3036 Stoner Avenue, Los Angeles, CA 90066</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of second inventor, if any <b>Rita M. Cantor</b>	
Second inventor's signature	Date
Residence <b>5239 Kingspine Road, Rolling Hills Estates, CA 90274</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of third inventor, if any <b>Jerome I. Rotter</b>		<b>11/9/03</b>
Third inventor's signature		Date
Residence <b>2617 Greenfield Avenue, Los Angeles, CA 90064</b>		
Citizenship <b>U.S.A.</b>		
Post Office Address <b>Same as above</b>		

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Betty P. Tsao, Rita M. Cantor, and Jerome I. Rotter  
Serial No.: 09/909,317  
Filed on: July 18, 2001  
Title: GENETIC MARKER TEST FOR LUPUS  
Art Unit: 2101

CERTIFICATE UNDER 37 C.F.R. 3.73(b) ESTABLISHING RIGHT OF ASSIGNEE TO PROSECUTE

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir or Madam:

CERTIFICATE OF MAILING	
I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO MAIL STOP MISSING PARTS, THE COMMISSIONER FOR PATENTS, P. O. BOX 1450, ALEXANDRIA, VA 22313-1450	
ON	January 14, 2004
BY	Ann Weiss
	1104/04
	Date of Signature

CEDARS-SINAI MEDICAL CENTER

certifies that it is the assignee of the entire right, title and interest in the patent application identified above by virtue of chain of title from the inventors, of the patent application identified above, to the current assignee as shown below:

1. From: Rita M. Cantor, and Jerome I. Rotter

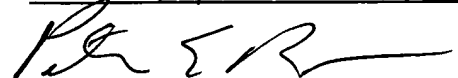
To: CEDARS-SINAI MEDICAL CENTER

The document is being filed herewith with the Patent and Trademark Office. A copy thereof is attached.

The undersigned (whose title is supplied below) is empowered to sign this certificate on behalf of the assignee.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements are made with the knowledge that willful false statements, and the like so made, are punishable by fine or imprisonment, or both, under Section 1001, Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Date: 12/9/03



Name: Peter E. Braveman, Esq.

Title: Senior Vice President for Legal Affairs and  
General Counsel

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)**

Applicant(s): Tsao et al.

Docket No.

18810-82152

Serial No.

09/909,317

Filing Date

July 18, 2001

Examiner

--

Group Art Unit

Confirm. # 5671

Invention:

Genetic Marker Test for Lupus

I hereby certify that this Verified Statement Claiming Small Entity Status

(Identify type of correspondence)

is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 14, 2004

(Date)

Ann Weiss

(Typed or Printed Name of Person Mailing Correspondence)

(Signature of Person Mailing Correspondence)

Note: Each paper must have its own certificate of mailing.



**VERIFIED STATEMENT (DECLARATION) CLAIMING  
SMALL ENTITY STATUS - NONPROFIT ORGANIZATION**

Docket No.  
**18810-82152**

Serial No.  
**09/909,317**

Filing Date  
**July 18, 2001**

Patent No.  
--

Issue Date  
--

Applicant/ Patentee: **Betty P. Tsao, Rita M. Cantor, and Jerome I. Rotter**

Invention:

**GENETIC MARKER TEST FOR LUPUS**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: **Cedars-Sinai Medical Center**

ADDRESS OF ORGANIZATION: **8700 Beverly Boulevard**  
**Los Angeles, CA 90048**

**TYPE OF NONPROFIT ORGANIZATION:**

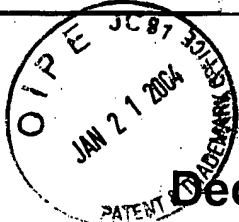
- ☐ University or other Institute of Higher Education
- ☒ Tax Exempt under Internal Revenue Service Code (26 U.S.C. 501(a) and 501(c)(3))
- ☐ Nonprofit Scientific or Educational under Statute of State of The United States of America  
Name of State: \_\_\_\_\_ Citation of Statute: \_\_\_\_\_
- ☐ Would Qualify as Tax Exempt under Internal Revenue Service Code (26 U.S.C. 501(a) and 501(c)(3)) if Located in The United States of America
- ☐ Would Qualify as Nonprofit Scientific or Educational under Statute of State of The United States of America if Located in The United States of America  
Name of State: \_\_\_\_\_ Citation of Statute: \_\_\_\_\_

I hereby declare that the above-identified nonprofit organization qualifies as a nonprofit organization as defined in 37 CFR 1.27(a)(3) for purposes of paying reduced fees to the United States Patent and Trademark Office under section 41(a) and (b) of Title 35, United States Code regarding the invention described in:

- ☐ the specification to be filed herewith.
- ☒ the application identified above.
- ☐ the patent identified above.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the above-identified nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify a small entity person under 37 CFR 1.27(a)(1) or by any concern which would not qualify as a small business concern under 37 CFR 1.27(a)(2) or a nonprofit organization under 37 CFR 1.27(a)(3).



Docket No.

18810-82152

# Declaration For Patent Application

## English Language Declaration

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My residence, post office address and citizenship are as stated below next to my name,

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### GENETIC MARKER TEST FOR LUPUS

the specification of which

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☐ is attached hereto.

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and was amended on \_\_\_\_\_

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Prior Foreign Application(s)

Priority Not Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☐

(Number)

(Country)

(Day/Month/Year Filed)

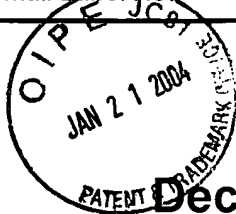
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Docket No.  
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# Declaration For Patent Application

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\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
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\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

\_\_\_\_\_  
(Status)  
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Full name of sole or first inventor <b>Betty P. Tsao</b>	
Sole or first inventor's signature <i>Betty P. Tsao</i>	Date 12/18/03
Residence <b>3036 Stoner Avenue, Los Angeles, CA 90066</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of second inventor, if any <b>Rita M. Cantor</b>	
Second inventor's signature	Date
Residence <b>5239 Kingspine Road, Rolling Hills Estates, CA 90274</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of third inventor, if any <b>Jerome I. Rotter</b>	
Third inventor's signature	Date
Residence <b>2617 Greenfield Avenue, Los Angeles, CA 90064</b>	
Citizenship <b>U.S.A.</b>	
Post Office Address <b>Same as above</b>	

Full name of fourth inventor, if any	
Fourth inventor's signature	Date
Residence	
Citizenship	
Post Office Address	